

Year Seven (October 1, 1988 - September 30, 1989)

Enrollment: 270,642 **acute** care members (125,708 AFDC & AFDC/MAO, 36,803 SSI & SSI/MAO, 39,690 MN/MI, 30,537 EAC, 3,236, ELIC, 23,031, 28,130 SOBRA Children, and 6,538 SOBRA Women), 10,616 **ALTCS** members. 852 persons enrolled in **Healthcare Group**.

Program:

Acute Care

- Effective October 1, 1988, eligibility age limits for children whose families were receiving food stamps became automatically eligible for AHCCCS were raised from 6 to under 14. (SB 1418, Chap 332, 1987)
- Effective October 1, 1988, eligibility age limits for SOBRA children with incomes to 100% FPL raised from under 5 years of age to under 6 years of age. (SB 1182, Chapter 3, Laws of 1988)
- Liver transplants for categorical children under age 18 added effective October 1, 1988. (SB 1486, Chapter 302, Laws of 1988)
- Family planning services, but not abortion or abortion counseling, added October 1, 1988. (SB 1486, Chapter 302, Laws of 1988)
- Home health care added January 1, 1989. (SB 1418, Chapter 332, Laws of 1987)
- Qualified Medicare Beneficiaries (QMB) added effective July 1, 1989. (SB 1151, Chapter 5, Laws of 1989)
- In late June, 1989, the legislature approved emergency legislation requiring counties, effective July 1, 1989, to process AHCCCS applicants first under federally funded categories before processing them under State-only funded categories.
- The five year January 1989 SRI International study found that AHCCCS was less expensive, provided higher quality of care for children and had better access than traditional Medicaid.
- 13 Health Plans served AHCCCS members.

ALTCS

- ALTCS program (SB 1418, Chapter 332, Laws of 1987) began in two phases: 1) DD population added December 19, 1988; and 2) EPD population added January 1, 1989.
- 5 Program Contractors served ALTCS members.

Healthcare Group

- Services are limited to Pima county effective February 1, 1989.

Waivers:

- Dropped three waivers that: excluded SNF services, nurse-midwife services, and family planning services.
- Added four waivers that enabled the State to:
 - provide HCBS to individuals with incomes not exceeding 300% SSI;
 - be exempt from federal requirements for timely financial eligibility determination for long term care recipients during the start up of ALTCS;
 - exclude hospitalized and others not requiring long term care services from the optional institutionalized eligibility categories; and
 - perform inspection of care on a sample basis.
- The 1115 waiver was extended on November 23, 1988 for 5 years until September 30, 1993.

Financial:

<u>Source</u>	<u>SFY Expenditures</u>	<u>Percentage</u>
Federal	\$192,720,200	36.1
State	244,260,300	45.9
Other	<u>95,724,800</u>	<u>18.0</u>
TOTAL	\$532,705,300	100.0

Does not include DSH payments and appropriations made to other State agencies.

Administration:

Number of FTEs = 834